

Case Management Time Study Frequently Asked Questions (FAQs)

Q. - How does the provider respond to the survey if the recipient is no longer receiving case management services, deceased, transferred or relocated?

A. - Enter zeroes on the first day of month and submit the survey with the other survey entries.

Q. - How was the case management survey sample determined?

A. - DMAS sampled MH and MR case management separately but the sampling methodology did not stratify the sample to ensure that each CSB would receive a proportionate number of MH and MR surveys. The sampling methodology randomly selected recipients in each survey category by the service performed. The initial sample included a little over 400 MH case management recipients and 400 MR case management recipients based on the appropriate procedure codes. DMAS sent an additional sample of case management surveys of 100 recipients billed with procedure code T1017 without modifier U3.

Q. - I am unable to view the message sent by secure email.

A. - When you receive the secure email, the box below will be displayed

VIEW MESSAGE

Click view message, enter you name and establish a password, this will give you access to the details in the email, including the list of recipients, the daily log worksheet and the list of allowed case management activities. Use the survey id in the excel list to enter the survey results.

Q. - What timeframe was used for survey sample?

A. - The initial sample of case management recipients was based on the January 2008 invoice files. CSBs that did not bill in the month of January 2008 did not receive any recipients in the initial time study. For these CSBs, DMAS subsequently sent recipients based on the December 2007 invoice files.

Q. - Why did our CSB only receive MH surveys and no MR surveys?

A. - Initially, DMAS had difficulty linking some provider numbers to specific CSBs, especially when CSBs use different provider numbers for MH and MR case management. This was corrected quickly.

DMAS has discovered anomalies in the billing patterns of CSBs that may be a significant contributing factor to the proportion of MH and MR services each CSB received. The appropriate procedure code for MH case management is H0023. The appropriate procedure code for MR case management is T1017 with modifier U3. One CSB billed all case management services using H0023. Another billed all case management services

using T1017, but no modifier. Other CSBs are billing MR case management with procedure code T1017 with no modifier. As a result, some MR recipients are included in the MH sample or the opposite. DMAS also did not sample recipients with claims for T1017 with no modifier. To address this, the online survey will be updated to require that each submission denote if the service is MH or MR case management. DMAS also decided to resample claims with procedure code T1017 with no modifier and sent additional recipients to individual CSBs. This will not affect the list of recipients you have already received. If you receive additional recipients for whom you have not been tracking time, please record the time to the best of your knowledge for the few days of the month before you receive the additional recipients.

Q. - How many case management surveys did each CSB receive?

A. - As a result of random sampling, some CSBs received very few case management surveys. After reviewing this issue, DMAS determined that all CSBs should receive a minimum of 9 case management surveys. In these cases (with the exception of one CSB), DMAS sent a revised sample. This only applied to case management surveys, not CMH Rehab/MR Waiver surveys.

Q. - I cannot locate the survey id on the paper surveys I received.

A. - The survey id is next to the service on the paper survey below the instructions. The survey id is underlined below:

Provider=123456789 GWINN CYNTHIA J NPI=987654321 Recipient=123456789012 DOE, JOHN Service= Case Management, Targeted Mental Health H0023 Survey=123456